

POSITION	ID NO.	DATE
CLASSIFIER	20	7/18/95
EXAMINER	401	8/22/95
TYPIST	28L	1/23/95
VERIFIER		
CORPS CORR.		
SPEC. HAND	4/6	1/22/95
FILE MAINT.	452	8-15-95
DRAFTING		

INDEX OF CLAIMS

Claim	Final	Original	Date
1		✓	1/2/95
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40		✓	1/22/95
41		✓	
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SYMBOLS

✓	Rejected
=	Allowed
-	(Through number) Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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